SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	FOR LINE NUMBER:				PAGE	156 ()F	36	
Use separate schedule(s)	(check only one)								
for each category of the Detailed Summary Page	X	11a		11b		11c	12		
zotanou cummary r ago		13		14		15	16		\Box_{17}

	Statements may not be sold or used by any personance name and address of any political committee to				
NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee					
Full Name (Last, First, Middle Initial) A. Ms. Maureen Foley	Date of Receipt				
Mailing Address 474 48th Avenue Apt. 12C	08 31 _ 2013 _				
City	State Zip Code	Transaction ID : PR3068920			
Long Island City	NY 11109-5612	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	30.00			
Name of Employer	Occupation				
New York Life Insurance Company	Agent				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	P/R Deduction (\$30.00 Monthly)			
Full Name (Last, First, Middle Initial) Mr. Michael M. Oleske	Date of Receipt				
Mailing Address 59 the Neck		08 31 _2013 _			
City	State Zip Code	Transaction ID : PR3088920			
Manhasset	NY 11030-1315	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	100.00			
Name of Employer	Occupation				
New York Life Insurance Company	Svp, Deputy Gc & Chief Tax Counsel				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	P/R Deduction (\$50.00 Bi-Weekly)			
Full Name (Last, First, Middle Initial) C. Ms. Michelle R. Albright	Data of Receipt				
Mailing Address 2006 Sea Palms Drive West	Date of Receipt				
	08 31 2013				
City	State Zip Code	Transaction ID : PR31609208920			
St. Simons Island	GA 31522-0000	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	200.00			
Name of Employer	Occupation				
New York Life Insurance Company	York Life Insurance Company Agent				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	1600.00	P/R Deduction (\$200.00 Monthly)			
SUBTOTAL of Receipts This Page (optional)					
TOTAL This Period (last page this line number	only)				